

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>6-28-05</u>		2 Serial/Patent # <u>10/522869</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
✓	Other <u>Search Fee</u>		1-28-05	\$ 100.00							
		7 TOTAL AMOUNT OF REFUND		\$ 100.00							
		8 TO BE REFUNDED BY:									
		Treasury Check									
		Credit Deposit A/C #:									
		9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"><tr><td>2</td><td>3</td><td>--</td><td>1</td><td>9</td><td>2</td><td>5</td></tr></table>			2	3	--	1	9	2	5
2	3	--	1	9	2	5					
10 REASON:											
	Overpayment										
	Duplicate Payment										
	No Fee Due (Explanation):										
<u>Fee Code Correction</u>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>Barbara A. Campbell</u>		TITLE: <u>Paralegal</u>									
SIGNATURE: <u>BAC</u>		Repln. PHONE 29/2005 BCAMPBEL 0016390300 DHH: 231925 Name/Number: 10522869 FC: 9204 \$100.00 CR									
OFFICE: <u>PCT/DO/EO</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: _____		DATE: _____									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: